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Michael Yeadon--- Corona vaccines batch scandal | www.kla.tv/22390.mp4 Author: Dr. Michael Yeadon

The Standard of Pharmaceutical Reproducibility

The pharmaceutical industry is built upon a foundation of extreme consistency and high-quality manufacturing. Large-scale producers such as Pfizer and Janssen are highly experienced in manufacturing billions of doses—ranging from tablets to complex injections—ensuring that every batch is identical in purity and composition. This process is strictly regulated by Good Manufacturing Practice (GMP) standards, where every step of production is overseen by regulators to ensure that the final drug product is reproducible and safe. Under these established protocols, one would expect any adverse events reported for a specific vaccine to be scattered evenly across all manufactured lots, representing a uniform baseline of performance.

Evidence of Disproportionate Toxicity

Independent investigations into the Vaccine Adverse Event Reporting System (VAERS) have revealed a significant departure from these manufacturing expectations. Analysis shows that approximately 90% of all reported adverse events are concentrated within less than 10% of the vaccine lots. When compared to decades of data regarding influenza vaccines, the discrepancy is stark. Historically, roughly 22,000 lots of flu vaccines showed an average of only four serious adverse events per lot, creating a consistent "background noise" of reports. In contrast, certain COVID-19 vaccine lots, such as EN6201, are associated with hundreds of serious reports, including life-threatening conditions and hospitalizations. Mathematically, such a vast range of outcomes—from near-zero reports in some lots to thousands in others—is impossible if the products contained the same material.

Scientific Barriers to Accidental Variation

The extreme variability observed cannot be dismissed as a simple manufacturing mishap or the result of a rushed production timeline. Dr. Yeadon asserts that for such a massive difference in "performance" to occur, the active ingredients themselves would likely need to vary by ten to one-hundred-fold. Furthermore, theories regarding product degradation or "cold chain" failures are scientifically insufficient. Typically, when biological materials like mRNA or DNA degrade, they lose functional activity rather than acquiring new, extreme toxicity. Because this pattern of "hot lots" is observed across three different manufacturers and two separate technologies (mRNA and DNA), it is highly unlikely to be a coincidental

error. Since these companies monitor real-time safety data, their continued distribution of these batches suggests the resulting toxicity is, at the very least, accepted.

Concerns Over Public Health Policy and Information Control

The widespread administration of these injections to groups at low risk—such as children, pregnant women, and those with natural immunity from previous infection—violates the fundamental precautionary principle of public health. If these measures were genuinely focused on health, they would be targeted specifically toward those who stand to benefit most. Instead, the narrative has been maintained through what is described as psychological warfare and the suppression of dissenting scientific voices. Major tech companies and media outlets have censored qualified professionals, preventing the public from accessing critical data regarding vaccine variability and potential risks.

Conclusion and the Call for Accountability

The presence of lots with such extreme toxicity levels suggests that these products may be legally classified as "adulterated," meaning they do not match the manufacturer's approved specifications. There is an urgent call for an immediate cessation of the vaccination program until these manufacturing discrepancies and safety concerns are fully and transparently investigated by legal and political authorities. Given the lack of action from official institutions, the responsibility falls to the public to demand accountability from representatives and to reclaim personal autonomy by refusing to comply with non-transparent health mandates. Taking a stand against these practices is presented as an essential step in addressing a global crisis and restoring public safety.

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